



Chesterfield County Volunteer Application

Chesterfield County -- Providing Volunteer Opportunities that Make a Difference

careers.chesterfield.gov

Date _____ Birth date (If under 18) _____
Position Applying for: _____ Department _____
Position Applying for: _____ Department _____
Position Applying for: _____ Department _____

PERSONAL INFORMATION

Name: _____ Email: _____
Street Address _____ City/State/Zip _____
Home Phone _____ Other Phone _____
In case of emergency, please contact: _____ Phone _____
Are you a current/former employee of Chesterfield County? ☐ YES ☐ NO
If yes, what department? _____ Name when employed _____

BACKGROUND VERIFICATION

Have you ever been convicted of a Felony? ☐ YES ☐ NO Misdemeanor? ☐ YES ☐ NO
If yes, give dates and please explain: _____
Are there any pending charges against you? ☐ YES ☐ NO Felony _____ Misdemeanor _____
If yes, give details: _____

EDUCATION HISTORY

Name and address of school/colleges attended and grade/credits/degree completed, starting with most recent:

Name and Location of School attended	Dates Attended	Credits/Grade completed	Area of Study, if applicable

If you did not graduate from high school, do you have a GED? ☐ YES ☐ NO

Please list any certificates, licenses, memberships which may be relevant to your application:

EMPLOYMENT HISTORY

Are you currently employed: ☐ Full-time ☐ Part-time ☐ Retired ☐ Student ☐ Other
Current Employer _____ Title/Position _____
Hours/Schedule _____
Have you ever volunteered before? ☐ YES ☐ NO If yes, where and in what role? _____

Please turn over

REFERENCES

Please provide two personal or professional references with phone numbers and their relationship to you.

1. Name _____ Phone _____ Relationship _____
2. Name _____ Phone _____ Relationship _____

VOLUNTEER INFORMATION

Are you a court-mandated volunteer? ☐ Yes ☐ No Number of hours needed _____

Are you volunteering for school credit? ☐ Yes ☐ No Number of hours needed _____

When are you available to begin volunteering? _____

How often are you interested in volunteering? ☐ Daily ☐ Weekly ☐ Monthly ☐ As Needed

Which would you prefer? ☐ A short-term project ☐ An on-going position

When can you volunteer? County offices are generally open weekdays from 8:30 – 5:00 pm.

Some programs may have evening or weekend shifts available.

Hours Available	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
Morning							
Afternoon							
Evening							

How did you hear about Chesterfield County's Volunteer program and why would you like to get involved?

Areas of Interest/Skill: (Check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Event Planning | <input type="checkbox"/> Outdoor Activities |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Fund-Raising | <input type="checkbox"/> Public Safety |
| <input type="checkbox"/> Clerical/Office Support | <input type="checkbox"/> Gardening | <input type="checkbox"/> Sports/Recreation |
| <input type="checkbox"/> Computer Programs | <input type="checkbox"/> Health Care | <input type="checkbox"/> Teaching/Tutoring/Mentoring |
| <input type="checkbox"/> Communication/Public Speaking | <input type="checkbox"/> Library Assistance | <input type="checkbox"/> Working with Animals/Nature |
| <input type="checkbox"/> Driving/Transporting | <input type="checkbox"/> Local History | <input type="checkbox"/> Working with Seniors |
| <input type="checkbox"/> Education/Training Clients | <input type="checkbox"/> Mechanical/Technical | <input type="checkbox"/> Working with Youth |
| <input type="checkbox"/> Other, please list _____ | <input type="checkbox"/> Offering Companionship | |

CERTIFICATION OF APPLICATION INFORMATION

I certify that the information I have provided to the previous questions is true and correct, and that no attempt has been made to conceal pertinent information. I understand that if any information given by me in this application is found to be false or misleading, I will be subject to dismissal at any time, and I agree to hold Chesterfield County, its officials and employees harmless in that event.

AUTHORIZATION TO OBTAIN BACKGROUND INFORMATION

I authorize Chesterfield County to conduct a background investigation in connection with my application for volunteering. This investigation may include information as to my criminal history, schools attended, Division of Motor Vehicles records, present/past employers, professional references, and other appropriate sources. Criminal background checks may be conducted on volunteers in Safety Sensitive, Financial and Security, and Juvenile Services positions. Volunteers in these categories may be required to submit to fingerprinting which will be forwarded to the Federal Bureau of Investigations. I authorize the release of any information that Chesterfield County may request from the above sources. All information received by the County will only be used in accordance with applicable law.

Signature _____ Date _____

Parent/Guardian Signature, if applicant is under 18 _____ Date _____

For more information please call Volunteer Services at 751-4142 or visit our website at careers.chesterfield.gov and click on Volunteer Opportunities, or complete and return this application to:

Volunteer Coordinator
Human Resource Management
Chesterfield County
P.O. Box 40
Chesterfield, VA 23832